

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
G.I.P.E. CLASSIFIER	<i>scw</i>	<i>3</i>	<i>3/2</i>
FORMALITY REVIEW	<i>NH</i>	<i>JC41920</i>	<i>03-07-01</i>
RESPONSE FORMALITY REVIEW	<i>ph</i>	<i>1030</i>	<i>6-20-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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